

group intervention were observed in PTSD symptoms, core beliefs, and social support. **RESEARCH IMPLICATIONS:** This research allows a better understanding about the effects of a group intervention specifically designed to promote the PTG. Furthermore, the assessment of PTG and other psychosocial variables, over the three measurement points, is an important contribution to scientific knowledge, since is according to the current social-cognitive theoretical model of PTG. **CLINICAL IMPLICATIONS:** The assessment of the efficacy of group intervention to facilitate PTG, as it is described in the present study, may encourage the application and inclusion of this intervention group in the hospitals' multidisciplinary health care, usually provided to Portuguese women with breast cancer. **ACKNOWLEDGEMENT OF FUNDING:** This study was funded by a Portuguese Foundation for Science and Technology (SFRH/BD/81515/2011).

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Power of the Past: A Randomized Controlled Trial to Assess Effectiveness of Life Review Therapy in Palliative Cancer Patients

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BACKGROUND: In clinical practice there is an urgent need for evidence-based psychosocial interventions targeting patients in the palliative phase of cancer to improve quality of life and dying. The aim of this study was to assess the effectiveness of structured life review therapy (LRT). **METHOD:** LRT is a 4-session home-based psychological intervention, led by specially training clinical psychologists, focusing on retrieving positive memories and generating a coherent and meaningful autobiography. This enables patients to re-evaluate life events and reconstruct the story of their lives, including the diagnosis of incurable cancer. After a pilot study, we carried out a randomized controlled trial (RCT). Patients in the intervention group received LRT and were compared to a control group (waiting list). Outcome measures included quality of life (EORTC QLQ-PAL15), ego-integrity (NEIS), spec-

ificity of autobiographical memory (AMT), and depressive symptoms (HADS; MINI). **RESULTS:** The pilot study revealed that patients with cancer in the palliative phase are able to retrieve more positive memories after LRT. In the following RCT 107 patients were included, of whom 54 received LRT and 53 were randomized into the control group. A total of 57 males and 50 females participated (mean age: 63; SD: 9.26, range: 31–86). Recruitment of patients was difficult, mainly because patients were still under treatment or too sick to participate. Dropout rate in the RCT was 28%, mainly due to progression of disease and death. Results regarding effectiveness will be available Summer 2014. **CONCLUSIONS:** LRT is positively valued by patients and psychologists and may be a way to help palliative cancer patients improve their quality of life, ego-integrity, autobiographic memory, and mood. The results of the RCT will provide insight into the effectiveness of LRT among cancer patients in the palliative phase. **RESEARCH IMPLICATIONS:** A strategic plan was developed to improve conducting a RCT among palliative cancer patients that may be used in future studies. **CLINICAL IMPLICATIONS:** There is an urgent need for evidence based psychosocial interventions in clinical practice of palliative cancer care. If this LRT-protocol proves to be effective, it can be implemented in clinical practice. **ACKNOWLEDGEMENT OF FUNDING:** This project is funded by The Netherlands Organisation for Health Research and Development (ZonMW).

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Building a Foundation for Empirically-Guided use of Cancer Narratives as a Patient Resource: Effects of Story Type and Individual Differences in Responses to Narratives

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BACKGROUND: Narrative accounts of people's experiences with cancer are widely available on the Internet and often incorporated into patient resources to provide hope and/or enhance treatment information. There is little empirical knowledge to guide their use. Yet, people sometimes respond to them in unintended ways (e.g., they report distress). This presentation describes research being conducted to enable empirically-guided use of cancer narratives, with the goal of maximizing their probability of promoting specific, intended positive patient outcomes. **METHOD:** Healthy participants ($n = 325$) completed an online study; they first completed baseline measures, including a measure of social comparison orientation (SCO-individual differences in the tendency to